DECLARAT

ND POWER OF ATTORNEY FOR PATENT A CATION



As a below named inventor, I h reby declar that my r sidenc, post offic address and citizenship ar as stat d below next to my name, and I believe I am the original, first and sol inventor (if only on name is listed below) or an original, first and soint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention intit d:

SEMICONDUCTOR SWITCHES AND SWITCHING CIRCUITS FOR MICROWAVE the specification of which (ch. ck one) (x) is attached her to; () was filed on as United States Application Number or PCT International Application Number , and was amended on I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulation, § 1.56. I hereby claim foreign priority benefits under Titl United States Code, § 119/365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate disclosing the subject matter claimed in this application and having a filing date (1) before that of the application on which priority is claimed, or (2) if no priority is claimed, before the filing date of this application. Prior foreign Application(s) <u>Number</u> Country Day/Month/Year Filed Priority Claim d 228311/1998 12/8/1998 Japan (X) Yes () No () Yes () No () Yes () No I hereby claim the benefit under Title 35, United States Code, § 120/305 of any United States application(s) listed below and PCT International Applications listed above or below, and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. I hereby claim the benefit under Title 35, United States Code, ∮ 120/365 of any United States application(s) listed below and (Application Number) Day/Month/Year Filed Status (Patented, Pending, Abandoned) hereby appoint Beth E. Arnold, Reg. No. 35,430; Paula A. Campbell, Reg. No. 32,503; Charles H. Cella, Reg. No. 38,099; Edward J. Kelly, Reg. No. 38,936; Donald W. Muirhead, Reg. No. 33,978; Chinh H. Pham, Reg. No. 39,329; Diana M. Ste I, Reg. No. 43,153; Philip C. Swain, Reg. No. 32,376; Anita Varma, Reg. No. 43,221; and Matthew P. Vincent, Reg. No. 36,709; as attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected ther with. Address all telephone calls to Donald W. Muirhead at telephone number (617) 832-1257. Address all correspondence to: Patent Group Foley, Hoag & Eliot LLP One Post Office Square I Boston, Ma. 02109-2170 I her by declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued ther on.

Inv ntor's signature

Date

August 9, 1999 Full name of sole or first inventor (given name, family name) HIROSHI MIZUTANI Citizenship Japanese Residence Tokyo, Japan Post Office Address (include zip code) c/o NEC Corporation, 7-1, Shiba 5-chome, Minato-ku, Tokyo Japan Inv ntor's signature ___ Full name of sole or first inventor (given name, family name) _____ Citizenship _____ Residence Post Office Address (includ zip cod) _____ Inventor's signatur Full name of sole or first inventor (given name, family name) Resid nce

Post Offic Address (include zip code)

⁽⁾ Additional inventors are being nam d on separately numbered sheets attach d hereto.